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CONFIRMATION NO. 7594

<b>SERIAL NUMBER</b> 10/754,368	<b>FILING OR 371(c) DATE</b> 01/09/2004 <b>RULE</b>	<b>CLASS</b> 380	<b>GROUP ART UNIT</b> 2109	<b>ATTORNEY DOCKET NO.</b> 224.	
<b>APPLICANTS</b> Richard A. A. Heylen, Leeds, UNITED KINGDOM;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/439,248 01/10/2003 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0300596.4:01/10/2003  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/15/2004</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Dr. B. Shaffer</i> <i>Kauim</i> <i>DSH</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 12
<b>ADDRESS</b> 31665					
<b>TITLE</b> Copy protection of digital data					
<b>FILING FEE RECEIVED</b> 2108	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		